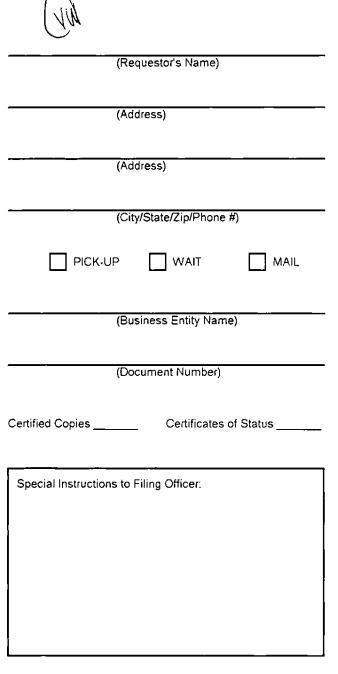
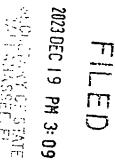
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12/19/23--01020--011 \*\*25.00



## **COVER LETTER**

P.O. Box 6327

Tallahassee, FL 32314

TO:

	Registration Section Division of Corporations						
end te		A IP HOLDING LLC					
SUBJEC	/l;	Name of Lim	ited Liability Company				
Division of Corporations  TABLA IP HOLDING LLC  Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  Eric Frommer  Name of Person  ATLAS Law Group PLLC  Firm/Company  5829 Grand National Drive  Address  Orlando, FL 32819  City/State and Zip Code ericfrommer@hotmail.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Eric Frommer  Name of Person  Area Code  Daytime Telephone Number  Enclosed is a check for the following amount:  S25.00 Filing Fee Certificate of Status Certificate copy is enclosed)  Certified Copy Certified Copy Certified Copy Certified Copy							
Please re	turn all corresp	oondence concerning this matter	to the following:				
		Eric Frommer					
		SLA IP HOLDING LLC  Name of Limited Liability Company  sicles of Amendment and fee(s) are submitted for filing.  correspondence concerning this matter to the following:  Eric Frommer  Name of Person  ATLAS Law Group PLLC  Firm/Company  5829 Grand National Drive  Address  Orlando, FL 32819  City/State and Zip Code ericfrommer@hotmail.com  E-mail address: (to be used for future annual report notification)  nation concerning this matter, please call:  Name of Person  At (407					
		ATLAS Law Group PLLC	·				
			Firm/Company				
		5829 Grand National Driv	e				
		<del></del>	Address				
		Orlando, FL 32819					
			City/State and Zip Code				
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For furth	er information	concerning this matter, please c	all:				
Eric From	nmer		at (				
	Name	of Person	Area Code Daytin	ne Telephone Number			
Enclosed	is a check for	the following amount:					
\$25.0	00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy			
		Section	Registration Se				
	to noisivici	Corporations	Division of Col	гроганопѕ			

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tabla IP Holding LLC			
(Name of the Limited Liability Compa (A Florida Limited )	ny as it now appears on our reco liability Company)	rds.)	
The Articles of Organization for this Limited Liability Company	were filed on 11/13/2023	and assigned	
Florida document number L23000513700			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
Tabla IP Holdings LLC			
The new name must be distinguishable and contain the words "Limited Liabi	ity Company," the designation "LI	.C" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	5829-5847 Grand National D	Prive	
(Principal office address MUST BE A STREET ADDRESS)	Orlando, FL 32819	<b>202</b> 7	
		THE PARTY	
		都是一	
Enter new mailing address, if applicable:		SA S m	
(Mailing address MAY BE A POST OFFICE BOX)			
		9. 0.9	
		H •	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	iddress on our records, <u>ente</u>	r the name of the new registere	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		Florida	
	City	Zip Code	

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Adđ
			□Remove
			Change
			Remove
			Change
			□Add
			Change
			DAdd
			□Remove
			Change
<del></del>			
			Change
			□ Add
			□Remove
			□ Change

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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f an cfl <u>Note:</u>	ve date, if other than the date of filing:
recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated	December 14
	auj
	Signature of a member or authorized representative of a member
	Anshu Jain

Filing Fee: \$25.00